

278138

2004-130T

CLASS C AMENDMENT FORM

Mail or Fax a copy of this form to: Public Service Commission of South Carolina Clerk's Office 101 Executive Center Dr., Ste 100 Columbia, S.C. 29210 PHONE (803) 896-5100 FAX (803) 896-5199	Need Assistance with completing the Form? SC Office of Regulatory Staff Transportation Department PHONE: (803) 737-0800
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DATE: 8/29/2018

I have the following Certificate:

☒ Class C Taxi # 7457
☐ Class C Charter # _____
 ☐ Class C Charter Bus # _____
☐ Class C Non-Emergency # _____
 ☐ Class C Stretcher Van# _____

Please consider this as my request for the following amendment(s) to my Certificate:

☒ **Name Change**

From: Kevin James Hamson DBA: _____
 (Current Name) (Current DBA if applicable)

TO: Kevin James Hamson DBA: Diamond Cab
 (New Name) (New DBA if applicable)

☐ **Scope of Authority**

From: _____ To: _____
 (Current Scope) (New Scope)

☐ **Passenger Limit**

From: _____ To: _____
 (Current Limit Number) (New Limit Number)

Kevin James Hamson
 (Name & DBA if DBA is applicable)

Myrtle Beach, SC 29577
 (City, State, Zip Code)

843-448-8888
 (Telephone Number)

1354 Cannon Road
 (Street and/or Mailing Address)

Kevin James Hamson
 (Signature)

Owner
 (Title) Owner, President, etc.

RECEIVED
 AUG 30 2018
 PSC SC
 MAIL / DMS